



TOWN OF MOREHEAD CITY
PERMIT APPLICATION

TYPE OF PERMIT BEING APPLIED FOR (CHECK ONE):

____ Electrical ____ Mechanical (*) ____ Plumbing ____ Fire Sprinkler ____ Natural Gas Piping

Date: _____

Property Owner: _____
(Name)(Contact Phone)

(Mailing Address, City, State, Zip)

Construction Site Address: _____

Contractor: _____
(Licensee Name)(Telephone)

(Mailing address, City, State, Zip)(License #)

Town of Morehead City Privilege License ☐ yes ☐ no ☐ n/a

(*) Electrical Contractor: _____
(License Name)(Telephone)

(Mailing address, City, State, Zip)(License #)

Town of Morehead City Privilege License ☐ yes ☐ no ☐ n/a

Total value of job: \$ _____

Specific description of proposed work: _____

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

Owner/Agent Signature: _____

Printed Name: _____

===== 706 Arendell Street, Morehead City, NC 28557 =====
===== Phone: (252) 726-6848 x125 Fax: (252) 726-2267 =====

Revised 5/08